

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	<i>AS</i>		<i>01/31/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	8-300
FORMALITY REVIEW	A.S.	313	9-11-00
RESPONSE FORMALITY REVIEW	<i>AS</i>	676	03/20/01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
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